

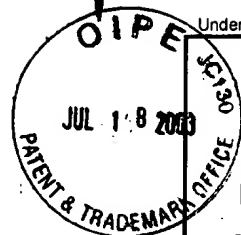
Please type a plus sign (+) inside this box → +

PTO/SB/81 (02-01)

Approved for use through 10/31/2002. OMB 0651-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.



**POWER OF ATTORNEY OR  
AUTHORIZATION OF AGENT**

Application Number	09/989,348
Filing Date	November 20, 2001
First Named Inventor	Levy et al.
Title	ADENINE BASED INHIBITORS OF ADENYLYL CYCLASE, PHARMACEUTICAL COMPOSITIONS, AND METHODS OF USE THEREOF
Group Art Unit	1624
Examiner Name	Mark L. Berch
Attorney Docket Number	021390-003710US

I hereby appoint:

☒ Practitioners at Customer Number  →

☐ Practitioner(s) named below:



20350

PATENT TRADEMARK OFFICE

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

☐ The above-mentioned Customer Number.

OR

☐ Practitioners at Customer Number  →

☐ Firm or  
Individual Name

Address

Address

City

State

ZIP

Country

Telephone

Fax

I am the:

☐ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

**SIGNATURE of Applicant or Assignee of Record**

Name	IAN ROBERT SILVERMAN
Signature	<i>Ian Robert Silverman</i>
Date	March 19, 2003

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

☐ \*Total of \_\_\_\_\_ forms are submitted.

RECEIVED  
JUL 22 2003  
TECH CENTER 1600/2900

Please type a plus sign (+) inside this box → ☐

PTO/SB/82 (10-00)

Approved for use through 10/31/2002. OMB 0651-0035  
Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.



# REVOCATION OF POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	09/989,348
Filing Date	November 20, 2001
First Named Inventor	Levy et al.
Group Art Unit	1624
Examiner Name	Mark L. Berch
Attorney Docket Number	021390-003710US

TECH CENTER 1500/2500

JUL 22 2003

RECEIVED

I hereby revoke all previous powers of attorney or authorizations of agent given in the above identified application:

☐ A Power of Attorney or Authorization of Agent is submitted herewith.

OR

☐ Please change the correspondence address for the above-identified application to:

☒ Customer Number



20350

PATENT TRADEMARK

OR

☐ Firm or Individual Name

Address

Address

City

Country

State

ZIP

Telephone

Fax

I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.  
*Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)*

## SIGNATURE of Applicant or Assignee of Record

Name Robert Silverman

Signature

Robert Silver

Date

march 19, 2003

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

☐ \*Total of forms are submitted.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.  
WC 9054423 v1